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400 Colony Square, Suite 1200
1201 Peachtree Street
Atlanta, GA 30361Telephone (404) 879-2150
Telefax (404) 879-2160information@pabstpatent.com
www.pabstpatent.com**TELEFAX**

Date: June 1, 2005 **Total pages:** 8 including cover
To: US PTO **Telephone:** **Telefax:** 703-872-9306
From: Rivka Monheit **Telephone:** 404-879-2152 **Telefax:** (404) 879-2160
Our Docket No. PG 101 **Client/Matter No.** 082440/00003
Your Docket No.

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MESSAGE:**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE****Applicant:** Abraham J. Domb**Serial No.:** 10/031,728**Art Unit:** 1623**Filed:** May 1, 2002**Examiner:** Ganapathy Krishnan**For:** *A BIODEGRADABLE POLYCATION COMPOSITION FOR DELIVERY OF AN ANIONIC MACROMOLECULE*

Transmittal Form PTO/SB/21

Fee Transmittal Form PTO/SB/17

Revocation of Power of Attorney with New Power of Attorney and Change of Correspondence Address

Statement Under 37 C.F.R. 3.73(b) with copy of Assignment

Change of Correspondence Address

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PTO/SB/21 (08-04)

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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/031,728	
	Filing Date	May 1, 2002	
	First Named Inventor	Abraham J. Domb	
	Art Unit	1623	
	Examiner Name	Ganapathy Krishnan	
Total Number of Pages in This Submission	7	Attorney Docket Number	PG 101

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input checked="" type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Change of Correspondence Address; Statement Under 37 CFR 3.73(b) with copy of Assignment.
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	Pabst Patent Group LLP		
Signature	<i>Rivka D. Monheit</i>		
Printed name	Rivka D. Monheit		
Date	June 1, 2005	Reg. No.	48,731

CERTIFICATE OF TRANSMISSION/MAILING			
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Signature	<i>Carla Stone</i>		
Typed or printed name	Carla Stone	Date	June 1, 2005

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PTO/SB/17 (12-04)

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Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). FEE TRANSMITTAL For FY 2005		Complete if Known	
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Application Number	10/031,728
		Filing Date	May 1, 2002
		First Named Inventor	Abraham J. Domb
		Examiner Name	Ganapathy Krishnan
		Art Unit	1623
TOTAL AMOUNT OF PAYMENT		(\$) 0.00	
		Attorney Docket No.	PG 101

METHOD OF PAYMENT (check all that apply)	
<input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____	
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FEE CALCULATION							
1. BASIC FILING, SEARCH, AND EXAMINATION FEES							
Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	
2. EXCESS CLAIM FEES							
Fee Description							Small Entity Fee (\$)
Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent							50
Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent							200
Multiple dependent claims							360
Total Claims		Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims		
- 20 or HP =		0	x	=	Fee (\$)		Fee Paid (\$)
HP = highest number of total claims paid for, if greater than 20							
Indep. Claims		Extra Claims	Fee (\$)	Fee Paid (\$)			
- 3 or HP =		0	x	=			
HP = highest number of independent claims paid for, if greater than 3							
3. APPLICATION SIZE FEE							
If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).							
Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)			
- 100 =		/ 50 =	(round up to a whole number) x	=			
4. OTHER FEE(S)							
Non-English Specification, \$130 fee (no small entity discount)							Fees Paid (\$)
Other:							

SUBMITTED BY			
Signature	<i>Rivka D. Monheit</i>	Registration No. (Attorney/Agent)	48,731
Name (Print/Type)	Rivka D. Monheit	Telephone	(404) 879-2152
		Date	June 1, 2005

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